i j .<u>F</u>.

Ŋ,

[]

1

Please type a plus sign (+) inside this box → +

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control flumber

## UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 1624-L-PCT-US-CIP First Inventor Day 82 **Q**/ Title FOLDING BELT FILTER Express Mail Label No. EL456429689US

See MPEF	APPLICATION ELEMENTS  P chapter 600 concerning utility patent application of	ontents.	Assistant Commissioner for Patents  ADDRESS TO: Box Patent Application Washington, D.C. 20231				
	ee Transmittal Form (e.g., PTO/SB/17) Submit an original, and a duplicate for fee processin	g)	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)				
	opplicant claims small entity status. See 37 CFR 1.27.		Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)				
	Specification [Total Pages	<b>20</b> ]	a. Computer Readable Form (CRF)				
1 "	Descriptive title of the invention		<ul> <li>b. Specification Sequence Listing on:</li> </ul>				
	Cross Reference to Related Applications		i. CD-ROM or CD-R (2 copies); or				
	Statement Regarding Fed sponsored R & D		ii. paper				
	Reference to sequence listing, a table, or a computer program listing appendix						
-	Background of the Invention		c. Statements verifying identity of above copies				
	Brief Summary of the Invention Brief Description of the Drawings (if filed)		ACCOMPANYING APPLICATION PARTS				
-	Detailed Description		Assignment Papers (cover sheet & document(s))				
	Claim(s) Abstract of the Disclosure		10. 37 CFR 3.73(b) Statement (when there is an assignee) Power of Attorney				
			11. English Translation Document (if applicable)				
4. 🕢 D	Prawing(s) (35 U.S.C. 113) [Total	9 ]	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations				
5. Oath or	Declaration [Total Pages	3 ]	13. Preliminary Amendment				
а. [	Newly executed (original or copy)		Return Receipt Postcard (MPEP 503)				
. r	Copy from a prior application (37 CF	R 1.63(d))	[14. Should be specifically itemized)				
b. [	(for continuation/divisional with Box 18 con	npleted)	15. Certified Copy of Priority Document(s) (if foreign priority is claimed)				
	i. DELETION OF INVENTOR(S	3)	Request and Certification under 35 U.S.C. 122				
	Signed statement attached deletin named in the prior application, see		(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.				
	1.63(d)(2) and 1.33(b).	: 37 OF K	<u> </u>				
لتا ا	Application Data Sheet. See 37 CFR 1.76		17. Other:				
	ONTINUING APPLICATION, check appropriate cation Data Sheet under 37 CFR 1.76:	e box, and s	upply the requisite information below and in a preliminary amendment,				
l —		ition-in-par	rt (CIP) of prior application No.: 09/496,982				
Prior	application information: Examiner Popovics		Group / Art Unit 1723				
For CONTIN	HATION OF DIVISIONAL APPS only. The entir	e disclosur	re of the prior application, from which an oath or declaration is supplie lying continuation or divisional application and is hereby incorporated by				
reference. The	he incorporation <u>can only</u> be relied upon when a	portion ha	s been inadvertently omitted from the submitted application parts.				
	19. COF	RESPO	NDENCE ADDRESS				
Contra			or X Correspondence address below				
Custo	omer Number or Bar Code Label						
	Daniel J. Long	ii NO. OI Alla	ach bar code label here).				
Name	Sand & Sebolt						
Address	Aston Park Professional Centre, Suite 194						
7441633	4801 Dressler Rd. NW						
City	Canton	State	Ohio Zip Code 44718				
Country	USA Tel	ephone	330-492-1925 Fax 330-492-8336				
Name	(Print/Type) Daniel J. Long	in messer in Viggalian	Registration No. (Attorney/Agent) 29-404				
	Daniel J. Long						

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to r espond to a collection of information unless it displays a valid OMB control number.

## **FEE TRANSMITTAI** for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

<u>"</u> I) (1) 1012 [] a, b

7 Ŋ IJ, \$355.00

Complete if Known					
Application Number	Unkonwn				
Filing Date	Herewith				
First Named Inventor	Day				
Examiner Name					
Group Art Unit					
Attorney Docket No.	1624-L-PCT-US-CIP				

METHOD OF PAYMENT		FEE CALCULATION (continued)					
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:		3. ADDITIONAL FEES Large Entity Small Entity					
Deposit Account 19-0083	Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	on	Fee Paid
Number 19-0083	105	130	205		Surcharge - late filing fee or	oath	
Deposit Account Name	127	50	227	25	Surcharge - late provisional sheet	filing fee or cover	
Charge Any Additional Fee Required	139	130	139	130	Non - English specification		
Under 37 CFR §§ 1.16 and 1.17	147	2,520	147	2,520	For filing a request for ex pa	rte reexamination	
Applicant claims small entity status. See 37 CFR § 1.27	112	920*		920*	Requesting publication of S action		
2. X Payment Enclosed:	113	1,840*	113	1,840*	Requesting publication of Si action	IR after Examiner	
Check Credit card Money Order Other	115	110	215	55	Extension for reply within fire	st month	
FEE CALCULATION	116	390	216	195	Extension for reply within se	cond month	
1. BASIC FILING FEE	117	890	217	445	Extension for reply within th	ird month	
Large Entity Small Entity	118	1,390	218	695	Extension for reply within fo	urth month	
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	128	1,890	228	945	Extension for reply within fift	th month	
Code (\$) Code (\$) Fee Paid  101 710 201 355 Utility filing fee 355.00	119	310	219	155	Notice of Appeal		
106 320 206 160 Design filing fee	120	310	220	155	Filing a brief in support of ar	n appeal	
107 490 207 245 Plant filing fee	121	270	221	135	Request for oral hearing		
108 710 208 355 Reissue filing fee	138	1,510	138	1,510	Petition to institute a public	use proceeding	
114 150 214 75 Provisional filing fee	140	110	240	55	Petition to revive - unavoida	ble	
SUBTOTAL (1) \$355.00	141	1,240	241	620	Petition to revive - unintention	onal	
	142	1,240	242	620	Utility issue fee (or reissue)		
2. EXTRA CLAIM FEES Fee from	143	440	243	220	Design issue fee		
Extra Claims below Fee Paid	144	600	244	300	Plant issue fee		
Total Claims 9 -20** = 0 X = 0.00 Independent 3 - 3** = 0 X = 0.00	122	130	122	130	Petitions to the Commission	er	
Independent 3 - 3** = 0 X = 0.00 Claims Multiple Dependent =	123	50	123	50	Processing fee under 37 CF	R § 1.17(q)	
Large Entity Small Entity	126	180	126	180	Submission of Information E Statement	Disclosure	
Fee Fee Fee Fee Description Code (\$) Code (\$)	581	40	581	40	Recording each patent assignment (times number of properties)		
103 18 203 9 Claims in excess of 20 102 80 202 40 Independent claims in excess of 3	146	710	246	355	Filing a submission after fina (37 CFR § 1.129(a))	al rejection	
104 270 204 135 Multiple dependent claim, if not paid	149	710	249	355	For each additional inventio (37 CFR § 1.129(b))	n to be examined	
109 80 209 40 ** Reissue independent claims	179	710	279	355	Request for Continued Exar	mination (RCE)	
over original patent	169	900	169	900	Request for expedited exam	nination	
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Oth	er fee (	specify)	)	of a design application		
SUBTOTAL (2) \$0.00							
**or number previously paid, if greater; For Reissues, see above	*Red	duced b	y Basic	Filing	Fee Paid SUBTO	TAL (3)	
SUBMITTED BY					Complete (i	f applicable)	
Name (Print/Type) Daniel J. Long		Registr Attorne	ation No //Agent)	).	29,404 Telephone	330-492-1	925
Signature David You					Date	4/23/0	)/

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

CERTIFICATE OF MA		IAIL" (37 CFR 1.10)	Docket No. 1624-L-PCT-US-CIP		
Serial No. Unknown	Filing Date Herewith	Examiner	Group Art Unit		
vention: FOLDING BEL	T FILTER				
I hereby certify that the fo	llowing correspondence:	orney, and Data Sheet			
	(Identify type of	correspondence)			
項 第 CFR 1.10 in an envelo	e United States Postal Service				
A/23/01  (Date)	Tiffany M. Godfrey  (Typed or Printed Nome of Person Mailing Correspondence)  (Signature of Person Mailing Correspondence)  EL456429689US  ("Express Mail" Mailing Label Number)				

Note: Each paper must have its own certificate of mailing.